

SCOTT COUNTY 4-H CAMP SCHOLARSHIP APPLICATION

Submission Deadline: March 28, 2025

Completion of this application is not a guarantee of scholarship receipt.

Please print legibly:

Date: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail: _____

Please mark if requesting a full or partial camp scholarship: Full Partial

(The 4-H Council reserves the right to award partial scholarships at any time for 4-H Camp)

Have you received a camp scholarship before: Yes No

Total Gross Household Income: _____

Does your family receive SNAP or TANF benefits? Yes No

Is applicant in foster care? Yes No

Does applicant have family members (s) applying as camp counselors? Yes No How many: _____

Please list any non 4-H affiliated clubs/activities you participate in: _____

Essay

Please attach a short essay answering 2 of the following 3 questions (minimum of one paragraph):

- Why would you like to attend 4-H Camp?
- How will this scholarship aid you in future goals?
- Are there any special circumstances you would like the council to consider?

Scholarship decisions will be announced via email by: April 18, 2025

For Council Scholarship Committee Use Only

Received by Scholarship Committee:

Committee Member Date

Reviewed by Scholarship Committee:

Committee Member Date

Committee Member Date

Committee Decision: _____ Date: _____

Final Council Approval: Full Partial (Amount if partial: _____)